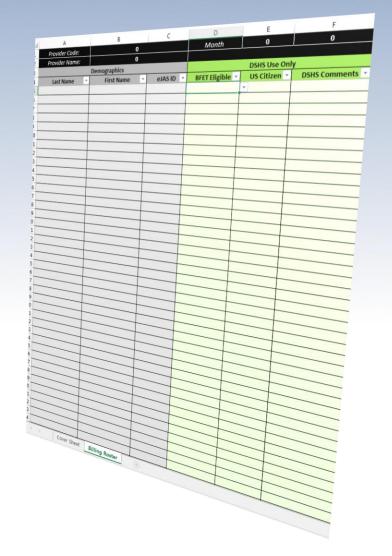
Transforming Lives

ORIA Billing Roster FFY 2019





What's new for FFY 2019?

- Simpler form
- Still two separate worksheets
 - Cover Sheet to collect Provider Information
 - Billing Roster to collect client
- Autofill functions

Transforming

Step 1: The Cover Sheet

Provider Information			
Provider Name:			
eJAS Contractor Code:			
Return List to the			
following email			
address(es):			

Billing Information		
Select the month for this Billing		
Select the FFY for this Billing		

DSHS Use Only		
Completed by:		
Completed on:		

Revised (10/2018)

Instructions:

Completing this information on this page will autofill the Billing Roster on the next page. Please follow the instructions below so the roster is completed correctly.

- 1. Complete the Provider Information
 - a. Enter your Agency's Name
 - b. Enter your EJAS Contractor Code
 - c. Enter the email addresses of all individuals to receive the completed $\operatorname{Billing}$ Roster.
- 2. Complete the Billing Information
 - a. Use the dropdown menu to select the month and FFY for this billing
- 3. Save your Billing Roster using the following naming convention:
 - a. This naming convention will help us locate and process your roster.
 [eJAS Contractor Code]_[Billing Month]



Provider Information

Provider Information				
Provider Name:				
eJAS Contractor Code:				
Return List to the following email address(es):				

Complete the Provider Information section by inputting:

- Your agency's name
- eJAS Contractor Code
- Email addresses for all individuals to receive the completed copy



Billing Information

Billing Information	,
Select the month for this Billing	
Select the FFY for this Billing	

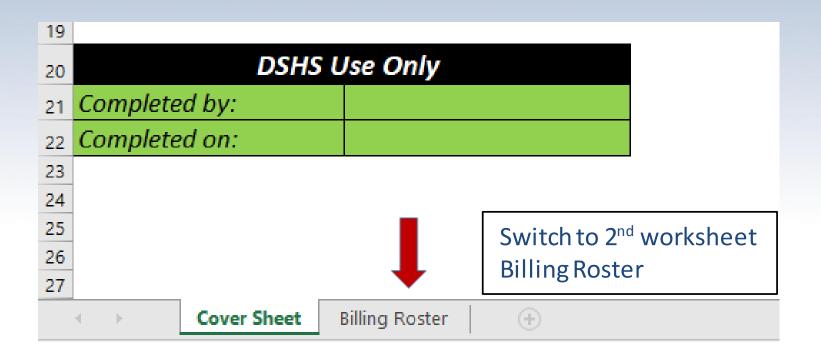
Complete the Billing Information section for this month's roster. Use the dropdown menu for <u>all</u> two boxes.

- Select the month for this roster
- Select the FFY for this roster

^{*}This information will auto fill on the Billing Roster.



Step 2: The Billing Roster



Transforming Lives

Step 2: The Billing Roster (cont)

Provider Code:	9ZZ		Month	October	FFY 2019
Provider Name:	ORIA Agency Name				
Demographics			DSHS Use Only		
Last Name	First Name	eJAS ID ▼	BFET Eligible 🔻	US Citizen 🔻	DSHS Comments 🔻
Ocean	Tess	135791			
Ward	Vivian	246824			
Pullman	Isabel	159357			
Tainot	Mercedes	456852			

1. Enter the client information in the Demographics columns.



Step 3: Save and Send

- 1. Save your Billing Roster using the following naming convention:
 - (eJAS contractor code)_(billing month)
 - For example:
 - 6BK October
 - 6EQ December
 - 6BT Feb

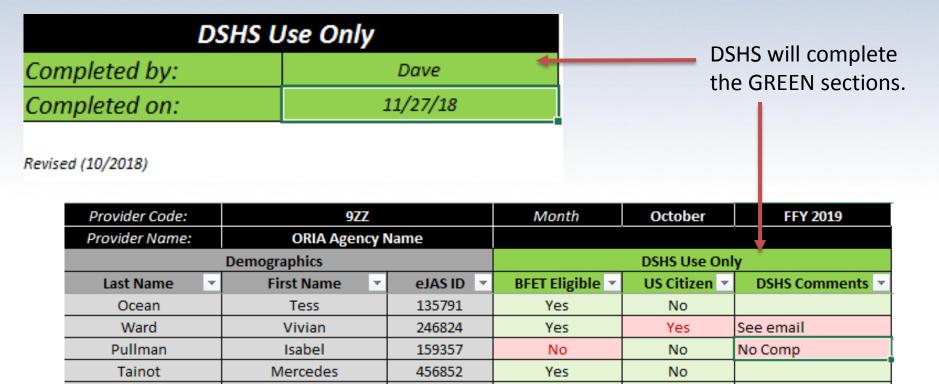
2. Send the Billing Roster to BFETBILLING@dshs.wa.gov

^{*}This naming convention helps us sort and find your rosters faster.



Returned Billing Roster

This is what you will receive back from the BFET Operations Team.





Need help completing your Billing Roster?

Contact a member of the BFET Operations Team for assistance.

Name	Phone	Email
Debbie Wilson	(509) 839-7219	Debra.Wilson@dshs.wa.gov
Kellyn Westra	(206) 716-2465	Kellyn.Westra@dshs.wa.gov
Linda Dofelmire	(360) 688-8511	<u>Linda.Dofelmire@dshs.wa.gov</u>
Melissa Jones	(360) 529-6144	Melissa.Jones@dshs.wa.gov
Mike Hanratty	(206) 450-7251	Michael.Hanratty@dshs.wa.gov
Rick Lee	(206) 450-4874	Rick.Lee2@dshs.wa.gov
Robin Thrower	(425) 223-1419	Robin.Thrower@dshs.wa.gov
Tea'Launna Brown	(206) 716-2432	Tealaunna.Brown@dshs.wa.gov
Terra Gilmore	(253) 428-3269	Terra.Gilmore@dshs.wa.gov
Terry Thomas	(509) 227-2643	Terry.Thomas@dshs.wa.gov